									Application	n or C	Docket Nu	ımber	
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000											916	54	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN L ENTITY	
TOTAL CLAIMS 27								RATE	FEE	<b>7</b>	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			Basic F	EE 355.00	OR	BASIC FE	€ 710.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20=		. 7			X\$ 9=		OR	X\$18=	126	
IN	DEPENDENT C	LAIMS	5 minus 3 =		· 2			X40=		OR	X80=	160	
MULTIPLE DEPENDENT CLAIM PRESENT							•	+135=		7	.270	1	
• 11	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	+	OR	+270= :TOTAL	996	
	CLAIMS AS AMENDED - PART II								· E	<b>_</b> 10.1	• •	RTHAN	
9-39-03 (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	QR.	SMALL			
AMENOMENT A		CLAIMS REMAINING AFTER AMENDMENT	Á	HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
S	Total	. 37	Minus	- 9	プ	- 10	I	X\$ 9=		OR	X\$18=	#180	
AME	Independent	NTATION OF MIL	Minus	PENDENT	S CLAIM	= 4'		X40=	4 / 1	OR	X8 <b>6</b> ≟	336	
							1	+135 <u>=</u>	gi da tan a	ÖŘ	+270=		
٠.							A	TOTA DDIT. FE		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)							4	•	_	:		
NT B		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
AMENDMENT B	Total		Minus	••	37	= -	F	X\$ 9=	/	OR	X\$18=	FEE	
	Independent	·	Minus		9	-		X40=		OR	- X80=		
	PINST PRESE	NTATION OF MU	CITY E DE	PENDENI	CLAIM			+135=		OR	+270=		
Lames and the second of the se								TOTAL		OR	YOTAL		
8	-31-05	(Column 1)		(Colum		(Column 3)		ODIT. FEE			ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	.37	Min s	3	7	<u>.</u>	Γ	X\$ 9=		OR!	X\$18=		
AME	Independent	NTATION OF MU	Minus	PENDENT	CLAIM		T	X40=		OR	X80=	:	
FIRST PRESENTATION OF MULTIFLE DEPENDENT CLAIM								+135=		OR	+270=		
	* If the entry in column 1 is less than the by in column 2, write "O" in column 3, "If the "Righest Number Previously Paid ("IN TRIS SPACE is less than 20, enter "20,"							YOYAL			TOTAL		
***	"If the "Highest Number Previously Paid of IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												
FORM	PTO-675	to the second control of the second control	0				Paleet	and Tod	made Office 1	C 050	1071/517 0	E COMMERCE	